



As a bel w-named inventor, I hereby declare that: My residence, post-office address, and citizenship are as stated below next to my name,

I believ that I am an riginal, first, and j int inventor f the subject matter which is claimed and for which a patent is sought in the invention intitled

## **HEMOLYTIC UREMIC SYNDROME**

the specification of which was filed 7 January 2002 as application 10/041,958.

Thereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

anowledge the duty to disclose information which is material to patentability as defined in 37 CFR

Sereby claim the benefit under 35 USC 120 of the United States Application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States Application(s) in the manner provided by the first paragraph of 35 USC 112, I acknowledge the duty to disclose material information as defined in 37 CFR 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

**Serial Number** 

Filing Date

**Status** 

09/302125

29 April 1999

I hereby appoint as attorneys to prosecute this application and to transact all business connected therewith:

Herbert Dubno, Reg. 19,752; Andrew Wilford, Reg. 26,597; Jonathan Myers, Reg. 26,963 and each of them individually.

Address all correspondence to:

The Firm of Karl F. Ross, P.C.
Customer Number 535
5676 Riverdale Avenue, Box 900
Bronx, NY 10471-0900

Direct all telephone calls to:

(718) 884-6600

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor:	Saul TZIPORI	
Inventor's signature	DIP NO	Date: 3/6/0 2
Residence: Shrewsbury, MA Post-office Address: 869 Main Street,	Shrewsbury, MA 01545	Citizen of USA
Full name of second inventor: Ran	maswamy BALAKRISHNAN	Date: 4 /11 /02
Residence: Framingham, US Chacld's Post-office Address: 6 Laverdure Circles	S Ford, PA	Citizen f USA

13 Foothill Path, Chadds Ford, PA 19317-9146

inderse aleque

Arthur DONOHUE-ROLFE Full name f third inventor: Olle Date: 3-6-02

Citizen of USA

Residence: Smdbury, MA Maynard, MA
Post-office Address: 347 North Road, Sudbury, MA 01701-16-5 Deer Path, Maynard, MA 01754